IN THE SNITED TATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of	)
KAMEYAMA et al.	) Art Unit 2141
Application Number: 09/940,506	) Description () Examiner Description () Shingles, Kristie D.
Filed: August 29, 2001	) Siningles, Kristie D.
For: DATA TRANSFER METHOD	)
Attorney Docket No. HITA.0100	)
Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450	

## **COVER LETTER**

Sir:

[x] The fee for submission of claims is calculated as shown below:

For	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	3	15	XXX (Over 20)	x \$50	0
Independent Claims	1	4	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). X ½					
			TOTAL		0.00

In addition, the below-identified communications proceeding:	are submitted in the above-captioned application or
<ul> <li>[ ] Response to Office Action         (with Claim Amendments)</li> <li>[ ] Substitute Specification</li> <li>[x ] Preliminary Amendment</li> <li>[ ] Information Disclosure Statement</li> </ul>	<ul> <li>[x] Petition for Extension of Time (3 months)</li> <li>[] Terminal Disclaimer</li> <li>[] Letter to Draftsperson w/_ sheets of replacement drawings</li> <li>[x] Request for Continued Examination</li> </ul>

[ ]	Please charge my <b>Deposit Account Number</b> in the amount of to cover the fees for A duplicate copy of this paper is enclosed.
[ x ]	Checks in the amount of \$790.00 to cover the RCE fee and \$1,020.00 to cover the three-month extension fees are enclosed.
[ x ]	The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to <b>Deposit Account Number 08-1480</b> .
	Respectfully submitted,
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